

## ECS Configuration Change Request

Page 1 of

Page(s)

<b>1. Originator</b> Sarah Lewallen	<b>2. Log Date:</b> 8/16/02	<b>3. CCR #:</b> 02-0694	<b>4. Rev:</b>	<b>5. Tel:</b> 301-925-0865	<b>6. Rm #:</b> 2117B	<b>7. Dept.</b> SE
<b>8. CCR Title:</b> Install a second DTF-2 drive on e0dis02.						
<b>9. Originator Signature/Date</b> Sarah Lewallen /s/ 8/16/02			<b>10. Class</b> II	<b>11. Type:</b> CCR	<b>12. Need Date:</b> 8/26/02	
<b>13. Office Manager Signature/Date</b>			<b>14. Category of Change:</b> Update ECS Baseline Doc.		<b>15. Priority:</b> (If "Emergency" fill in Block 27). Routine	
<b>16. Documentation/Drawings Impacted</b> ( <i>Review and submit checklist</i> ): 920-TDE-001			<b>17. Schedule Impact:</b> None		<b>18. CI(s) Affected:</b> DISTHW	
<b>19. Release Affected by this Change:</b> 6A, 6B		<b>20. Date due to Customer:</b>		<b>21. Estimated Cost:</b> None - Under 100K		
<b>22. Source Reference:</b> <input type="checkbox"/> NCR (attach) <input type="checkbox"/> Action Item <input type="checkbox"/> Tech Ref. <input type="checkbox"/> GSFC <input checked="" type="checkbox"/> Other: ESD 158						
<b>23. Problem: (use additional Sheets if necessary)</b> Need backup drive for the Aster ingest.						
<b>24. Proposed Solution: (use additional sheets if necessary)</b> Ship DTF drive EIN 13529 to EDC. Add second DTF-2 drive to e0dis02.						
<b>25. Alternate Solution: (use additional sheets if necessary)</b> None						
<b>26. Consequences if Change(s) are not approved: (use additional sheets if necessary)</b> If primary drive fails, would not be able to perform Aster Ingest						
<b>27. Justification for Emergency (If Block 15 is "Emergency"):</b>						
<b>28. Site(s) Affected:</b> <input type="checkbox"/> EDF <input type="checkbox"/> PVC <input type="checkbox"/> VATC <input checked="" type="checkbox"/> EDC <input type="checkbox"/> GSFC <input type="checkbox"/> LaRC <input type="checkbox"/> NSIDC <input type="checkbox"/> SMC <input type="checkbox"/> AK <input type="checkbox"/> JPL <input type="checkbox"/> EOC <input type="checkbox"/> IDG Test Cell <input type="checkbox"/> Other						
<b>29. Board Comments:</b>				<b>30. Work Assigned To:</b>	<b>31. CCR Closed Date:</b>	
<b>32. EDF/SCDV CCB Chair (Sign/Date):</b>		<b>Disposition:</b> Approved App/Com. Disapproved Withdraw Fwd/ESDIS ERB Fwd/ECS				
<b>33. M&amp;O CCB Chair (Sign/Date):</b> Gary Gavigan /s/ 8/20/02		<b>Disposition:</b> <b>Approved</b> App/Com. Disapproved Withdraw Fwd/ESDIS ERB Fwd/ECS				
<b>34. ECS CCB Chair (Sign/Date):</b>		<b>Disposition:</b> Approved App/Com. Disapproved Withdraw Fwd/ESDIS ERB Fwd/ESDIS				